

**ACKNOWLEDGEMENT OF NOTIFICATION
OF
HAZARDOUS WASTE ACTIVITY**

03/03/2006

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NJD001328806
INSTALLATION NAME: CSAB-YOOHOO
INSTALLATION ADDRESS : 600 COMMERCIAL AVE
CARLSTADT, NJ 07072
MAILING ADDRESS : 600 COMMERCIAL AVE
CARLSTADT, NJ 07072

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866**

**ATTN: RCRA NOTIFICATIONS
Tel : (212) 637-4106
Fax: (212) 637-3056**

**TO: CSAB-YOOHOO
or Current Occupant
ATTN: ALEXANDRIA DRESSER
600 COMMERCIAL AVE
CARLSTADT, NJ 07072**

SEND COMPLETED**FORM TO:**The Appropriate State or
EPA Regional Office.

United States Environmental Protection Agency

RCRA SUBTITLE C SITE IDENTIFICATION FORM**1. Reason for
Submittal**
(See instructions
on page 13.)MARK ALL BOX(ES)
THAT APPLY**Reason for Submittal:**

- ☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)
- ☒ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)
- ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application
- ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____)
- ☐ As a component of the Hazardous Waste Report

**2. Site EPA ID
Number (page 14)**

EPA ID Number

NJ D001328806

3. Site Name
(page 14)

Name:

CSAB-400H00

**4. Site Location
Information**
(page 14)

Street Address:

600 COMMERCIAL AVENUE

City, Town, or Village:

CARLSTADT

State:

NEW JERSEY

County Name:

BERGEN

Zip Code:

07072

5. Site Land Type
(page 14)Site Land Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other**6. North American
Industry
Classification
System (NAICS)
Code(s) for the Site**
(page 14)

A.

312111

B.

C.

D.

**7. Site Mailing
Address**
(page 15)

Street or P. O. Box:

600 COMMERCIAL AVENUE

City, Town, or Village:

CARLSTADT

State:

NEW JERSEY

Country:

U.S.A.

Zip Code:

07072

**8. Site Contact
Person**
(page 15)

First Name:

ALEXANDRIA

MI:

Last Name:

DRESSER

Phone Number: 732-969-1600 Extension: 3150

Email address:

ALEXANDRIA.DRESSER@CS-AMERICAS.COM

**9. Operator and
Legal Owner
of the Site**
(pages 15 and 16)

A. Name of Site's Operator:

MOTT'S, LLP

Date Became Operator (mm/dd/yyyy):

Operator Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

B. Name of Site's Legal Owner:

MOTT'S, LLP

Date Became Owner (mm/dd/yyyy):

Owner Type: ☒ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other

9. Legal Owner (Continued) Address	Street or P. O. Box:	<u>900 KING STREET</u>	
	City, Town, or Village:	<u>RYE BROOK</u>	
	State:	<u>NEW YORK</u>	
	Country:	<u>U.S.A.</u>	Zip Code:

10. Type of Regulated Waste Activity

Mark "Yes" or "No" for all activities; complete any additional boxes as instructed. (See instructions on pages 16 to 20.)

A. Hazardous Waste Activities

Complete all parts for 1 through 6.

Y ☒ N ☐ 1. Generator of Hazardous Waste

If "Yes", choose only one of the following - a, b, or c.

☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)
of non-acute hazardous waste; or☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)
of non-acute hazardous waste; or☒ c. CESQG: Less than 100 kg/mo (220 lbs./mo.)
of non-acute hazardous waste

In addition, indicate other generator activities.

Y ☐ N ☐ d. United States Importer of Hazardous WasteY ☐ N ☐ e. Mixed Waste (hazardous and radioactive) GeneratorY ☐ N ☐ 2. Transporter of Hazardous WasteY ☐ N ☐ 3. Treater, Storer, or Disposer of
Hazardous Waste (at your site) Note:
A hazardous waste permit is required for
this activity.Y ☐ N ☐ 4. Recycler of Hazardous Waste (at your
site)Y ☐ N ☐ 5. Exempt Boiler and/or Industrial
Furnace

If "Yes", mark each that applies.

☐ a. Small Quantity On-site Burner
Exemption☐ b. Smelting, Melting, and Refining
Furnace ExemptionY ☐ N ☐ 6. Underground Injection Control

B. Universal Waste Activities

Y ☐ N ☐ 1. Large Quantity Handler of Universal Waste (accumulate
5,000 kg or more) [refer to your State regulations to
determine what is regulated]. Indicate types of universal
waste generated and/or accumulated at your site. If "Yes",
mark all boxes that apply:

	Generate	Accumulate
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

Y ☐ N ☐ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities

Mark all boxes that apply.

Y ☐ N ☐ 1. Used Oil Transporter

If "Yes", mark each that applies.

☐ a. Transporter
☐ b. Transfer FacilityY ☐ N ☐ 2. Used Oil Processor and/or Re-refiner

If "Yes", mark each that applies.

☐ a. Processor
☐ b. Re-refinerY ☐ N ☐ 3. Off-Specification Used Oil BurnerY ☐ N ☐ 4. Used Oil Fuel Marketer

If "Yes", mark each that applies.

☐ a. Marketer Who Directs Shipment of
Off-Specification Used Oil to
Off-Specification Used Oil Burner
☐ b. Marketer Who First Claims the
Used Oil Meets the Specifications

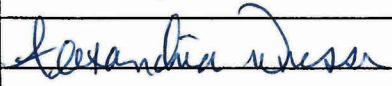
11. Description of Hazardous Wastes (See instructions on page 20.)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (See instructions on page 20.)

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (See instructions on page 20.)

Signature of operator, owner, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
	ALEXANDRIA DRESSER, EHS MGR	2/22/06



**Environmental Waste
Management Associates**

Corporate Headquarters:
100 Misty Lane
P.O. Box 5430
Parsippany, NJ 07054
phone (973) 560-1400
fax (973) 560-0400
website - www.ewma.com

Sent via Federal Express

February 24, 2006

Mr. Jack Hoyt
US EPA - Region II,
290 Broadway, 22 Floor
New York, NY 10007-1866

Re: *RCRA Subtitle C Site Identification Form*
600 Commercial Avenue 1200 Milik Street
Carlstadt, NJ Carteret, NJ
EWMA Case No. 204993

Dear Mr. Hoyt:

Enclosed please find the above referenced form to update site identification information for both 600 Commercial Avenue, Carlstadt, NJ and 1200 Milik Street, Carteret, NJ. If you have any questions or require any additional information, feel free to call me at 973-560-1400, x145.

Sincerely,
Environmental Waste Management Associates, LLC

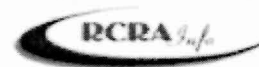
A handwritten signature in black ink, appearing to read 'CGorczyca', is written over the typed name.

Craig Gorczyca, CHMM
Director, Operations & Waste Management Services

Enclosure



Site Identification Form Update



* = Indicates you must provide this field.

General Information:			
Received Date: 7/27/1998	Extract to Public <input checked="" type="checkbox"/>	Non-notifier:	Send Acknowledgement:
Number of Employees: 0		Seq: 1	

1. Reason for Submittal(Source)
<input checked="" type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). (Source N)
<input type="checkbox"/> To provide subsequent notification (to update site identification information). (Source N)
<input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. (Source A)
<input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application. (Source A)
<input type="checkbox"/> As a component of the Hazardous Waste Report. (Source R)
<input type="checkbox"/> Implementer - Agency that is Implementer of Record for Handler. (Source I)
<input type="checkbox"/> Emergency. (Source E)
<input type="checkbox"/> Temporary. (Source T)

2. Site ID			
EPA ID:	NJD001328806	Activity Location:	NJ
Second ID:			

3. Site Name	
Name:	* AUSTIN NICHOLS & CO INC

4. Site Location (Physical address not P.O. Box or Route)			
Number: 600	Street1: * COMMERCIAL AVE	Street2:	
City: * CARLSTADT	State: * NJ - New Jersey	Zip code: * 07072	County: * BERGEN - NJ003
State District: NORTHERN			

5. Site Land Type

Site Land Type: P - Private

6. North American Industry Classification System (NAICS)

A.

B.

C.

D.

7. Site Mailing Address

Copy address from

Number: 600

Street1: COMMERCIAL AVE

Street2:

City: CARLSTADT

State: NJ - New Jersey

Zip code: 07072

Country: US - UNITED STATES

8. Site Contact Person

First Name: DANIEL

Middle Initial:

Last

Name: WILSON

Phone Number: 2019330070

Phone Number

Ext:

Email

Address:

8a. Site Contact Address

Copy address from

Number:

Street1 or
P.O.

Box: 600 COMMERCIAL AVE

Street2 or
P.O.

Box:

City: CARLSTADT

State: NJ - New Jersey

Zip code: 07072

Country: US - UNITED STATES

9. Legal Owner and OperatorAdd/Update/Delete an
Owner or Operator**A. Legal Owner**

Act Loc	Seq	Ind	Type	Date Became Current	Date Ended Current	Owner Name	No.	Street	City	State	Zip	Phone	Cr
NJ	1	CO	P			AUSTIN NICHOLS & CO INC		600 COMMERCIAL AVE	CARLSTADT	NJ	07072	2019330070	

B. Legal Operator

Act Loc	Seq	Ind	Type	Date Became Current	Date Ended Current	Operator Name	No.	Street	City	State	Zip	Phone	Cntry
---------	-----	-----	------	---------------------	--------------------	---------------	-----	--------	------	-------	-----	-------	-------

Please enter your Owner/Operator information

first.

10. Type of Federal Regulated Waste Activity**A. Hazardous Waste Activity****1. Generator of Hazardous Waste (Federal)**2 - HQ - Small Quantity Generator ☒

Indicate other generator activities (check all that apply).

U - Unknown ☒ d. United States Importer of Hazardous WasteU - Unknown ☒ e. Mixed Waste (hazardous and radioactive) Generator**Generator of Hazardous Waste (State)**

For Items 2 through 6, check all that apply

☐ 2. Transporter of Hazardous Waste☐ 3. Treater, Storer, or Disposer of Hazardous Waste(at your site) Note: A hazardous waste permit is required for this activity.☐ 4. Recycler of Hazardous Waste(at your site) Note: A hazardous waste permit may be required for this activity.**5. Exempt Boiler and/or Industrial Furnace**U - Unknown ☒ a. Small Quantity On-site Burner Exemption☒ U - Unknown ☒ b. Smelting, Melting, Refining Furnace Exemption☐ 6. Underground Injection Control**B. Universal Waste Activities****1. Large Quantity Handler of Universal Waste [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply).**

	Generated	Accumulated
Batteries - (US)	<input type="checkbox"/>	<input type="checkbox"/>
Lamps - (US)	<input type="checkbox"/>	<input type="checkbox"/>
Pesticides - (US)	<input type="checkbox"/>	<input type="checkbox"/>
Thermostats - (US)	<input type="checkbox"/>	<input type="checkbox"/>

☐ 2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities**1. Used Oil Transporter - Indicate Type(s) of Activity (ies)**☐ a. Transporter☐ b. Transfer Facility**2. Used Oil Processor and/or Re-refiner - Indicate Type(s) of Activity(ies)**☐ a. Processor☐ b. Re-refiner☐ 3. Off-Specification Used Oil Burner**4. Used Oil Fuel Marketer - Indicate Type(s) of Activity (ies)**☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

D. State Activities**10a. Latitude/Longitude**

Latitude Measure: 0		Longitude Measure: 0	
Geometric Type Code:		Reference Point Code:	
		Source Map Scale Numbers:	0
Horizontal Accuracy Measure:		Horizontal Collection Method:	
		Horizontal Reference Datum:	

11. Description of Hazardous Wastes

To enter multiple waste codes, hold down the CTRL key and click the individual codes or hold down the SHIFT key and click to select a range of codes.

Type D	Type F	Type K	Type P	Type U	Type X
<input type="checkbox"/> Select All	<input type="checkbox"/> Select All	<input type="checkbox"/> Select All	<input type="checkbox"/> Select All	<input type="checkbox"/> Select All	<input type="checkbox"/> Select All
D001	F001	K001	LABP	U001	C165
D002	F002	K002	P001	U002	C168
D003	F003	K003	P002	U003	C195
D004	F004	K004	P003	U004	C217
D005	F005	K005	P004	U005	C224
D006	F006	K006	P005	U006	C226
D007	F007	K007	P006	U007	C227
D008	F008	K008	P007	U008	C228
D009	F009	K009	P008	U009	C229
D010	F010	K010	P009	U010	C245

12. Comments 2000 characters remaining.

Update 10/03 to ensure Leg_Dist is associated with correct Counties

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

First Name		Middle Initial		Last Name	
Title		Date		Signature	
First Name		Middle Initial		Last Name	
Title		Date		Signature	
First Name		Middle Initial		Last Name	

Austin, Nichols & Co.

Soft Drink Division

600 COMMERCIAL AVENUE

CARLSTADT, NEW JERSEY 07072

PHONE: (201) 933-0070



August 12, 1998

Mr. Jack Hoyt
US EPA Region II
290 Broadway
22nd Floor, AWMD
New York, New York 10007-1866

Dear Mr. Hoyt:

Austin, Nichols & Co. is no longer generating hazardous waste at the below referenced site.

NJD001328806 600 Commercial Avenue, Carlstadt, NJ 07072

The EPA ID# has been used to complete a waste cleanout project and should now be deactivated.

You may contact me with any question at (201) 933-0070

Thank you for your assistance in this matter.

Very truly yours,

AUSTIN, NICHOLS & CO.
Soft Drink Division

Dan Wilson
Quality Assurance Manager

DW:id

Gen 2 = 2106
8/17/98 BO

To avoid delays in processing, please complete all sections.
Only original signature of the Generator is acceptable.

Please print or type with ELITE

Date Received
(For Official Use Only)

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

EPA

Notification of Regulated Waste Activity

United States Environmental Protection Agency

Finds

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification

B. Subsequent Notification
(Complete item C)

C. Installation's EPA ID Number

150 rd 328806

II. Name of Installation (Include company and specific site name)

Austin Nichols and Company, Inc.

III. Location of Installation / Requires Building Number or Latitude and Longitude for processing.

Street

600 Commercial Avenue

Street (Continued)

City or Town

Carlstadt

State

NJ

Zip Code

07072

County Name

Bergen

IV. Installation Mailing Address

Street or P.O. Box

600 Commercial Avenue

City or Town

Carlstadt

State

NJ

Zip Code

07072

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

Wilson

Job Title

Quality Assurance Manager

(First)

Daniel

Phone Number (Area Code and Number)

201 - 933-0070

Ext 109

VI. Installation Contact Address

A. Contract Address
Location Mailing Other

B. Street or P.O. Box

City or Town

State

Zip Code

VII. Ownership

A. Name of Installation's Legal Owner

Austin Nichols and Company, Inc.

Street, P.O. Box, or Route Number

600 Commercial Avenue

City or Town

Carlstadt

State

NJ

Zip Code

07072

Phone Number (Area Code and Number)

201-933-0070

B. Land Type

C. Owner Type

D. Change of Owner
Indicator

Yes

No

(Date Changed)
Month Day Year

P

P

X

From: Jack Hoyt, AWMD, EPA, Region 2, 290 Broadway, 22 Fl.
Tel: (212) 637 4106

spoke to voice mail
7/29/98

Call

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to instructions)

A. Hazardous Waste Activity

1. Generator (See instructions)
☐ a. Greater than 1000kg/mo (2,200 lbs.)
☒ b. 100 to 1000 kg/mo (200-2,200 lbs.)
☒ c. Less than 100 kg/mo (220 lbs.)
 2. Transporter (Indicate Mode in boxes 1-5 below)
☐ a. For own waste only
☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify

- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.
☐ 4. Hazardous Waste Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Boiler and/or Industrial Furnace
☐ 1. Smelter Deferral
☐ 2. Small Quantity Exemption
☐ Indicate Type of Combustion Device(s)
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer
☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
 2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)
☐ a. Utility Boiler
☐ b. Industrial Boiler
☐ c. Industrial Furnace
 3. Used Oil Transporter - Indicate Type(s) of Activity(ies)
☐ a. Transporter
☐ b. Transfer Facility
 4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
☐ a. Process
☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☒ 3. Reactive (D003) ☐ 4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))
☐ D005 ☐ D007 ☐ D008 ☐ D009

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
F003	P096				
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Daniel Wilson

Name and Official Title (Type or print)

Daniel Wilson
Quality Assurance Manager

Date Signed

7-27-98

XI. Comments

This ID # will be used for a one time cleanout. The number should be de-activated upon completion; a request letter will be sent.

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: January 21, 2016 - 11:49 AM

Version 5.0

User Selection Criteria

Location:	New Jersey, all activities	Activity Location:	None Chosen
Handler ID:	NJD001328806	Group of IDs:	None Chosen
Handler Name:			
Handler Universe:	All Facilities Regardless of Universe		
Determined Date Range:	From: 10/01/1980 To: 01/21/2016		
Location County Code:	None Chosen	Evaluation Type:	
Location City:		Focus Area:	
Location Zip Code:		Violation Type:	
State District:	None Chosen	Display Code Descrip.:	Yes
Sort Order:	Region, State, Handler Name	Display Universes:	Yes

Results

Data meeting the criteria you selected follows.

Total Pages:4 Total Handlers:1

Report Description

This report presents available information from the Resource Conservation and Recovery Act Information System (RCRAInfo) about compliance evaluations, violations, and enforcement actions meeting the criteria supplied by the user. Evaluations showing no violations does not always indicate that no violations were determined. Violation without enforcement actions does not always mean no enforcement action will be issued. In order to avoid releasing enforcement sensitive information to the public the following information is not shown on the report: pending civil / judicial referrals, criminal actions and referrals, and State to EPA referrals; all other enforcement actions are released.

Report Information

Name: cme_foia.rdf
Developed by: EPA Headquarters, Office of Enforcement and Compliance Assurance
Deployed: June 2006
Last Updated: May 2012
Contact: rcrainfo.help@epa.gov
Tables Used: cmecomp3, ccitation3, hreport_univ5, lu_citation, lu_state, hid_groups
Libraries: none

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: January 21, 2016 - 11:49 AM

Page 2

CSAB-YOOHOO

County Name / Code: BERGEN / NJ003

NJD001328806

Location: 600 COMMERCIAL AVE; CARLSTADT, NJ 07072

REGION 02

Mailing: 600 COMMERCIAL AVE; CARLSTADT, NJ 07072

Activity Location: NJ		State District: NORTHERN		Accessibility:		Non-Notifier:		Extract Flag: Y		Active Site: N			
Generator:	N	Transporter:	N	Operating TSDF:	-----	IC In Place:	N	El Indicator (HE / GW):	N / N				
Short-Term Gen:	N	Transfer Facility:	N	Offsite Receiver:	N	HSM:	N	Subpart K:	----				
Full Enforcement:	-----	Converter:	-----	State Unaddressed SNC:	N	EPA Unaddressed SNC:	N						
CA Wrkld:	N	State TSDF:	-----	State Addressed SNC:	N	EPA Addressed SNC:	N						
Active State Gen:	N			State SNC w/Comp Sched:	N	EPA SNC w/Comp Sched:	N						

Evaluations With No Violations:

CDI Evaluation	09/09/1999	Activity Location: NJ	By: State	Identifier: 000	Person: NJSS	Branch: N	Found Violation: NO
Citizen Complaint: NO		Multimedia Inspection: NO	Sampling: NO	Not Subtitle C: NO	Day Zero:		Focus Area:

Total Number of Handlers: 1

Total Number of Activity Locations: 1

* End of Report *

* Note: Penalty amount may not reflect all violations cited.

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: January 21, 2016 - 11:49 AM

Page 3

Description of codes used on the report:

Universes	Description of Universes
Generator	Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Conditionally Exempt Small Quantity Generator (CEG), or not a generator (N).
Transporter	Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe).
Operating TSDF	Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
IC in Place	Indicates that the facility has Institutional Controls in place. ('Y' indicates that the facility is in this universe).
EI Indicator (HE / GW)	Indicates that the facility has controls in place for Environmental Indicators. HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist) GW - Groundwater Release ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist)
Short-Term Gen	Indicates that the facility is a short term or one time event generator and not generating from ongoing processes.
Transfer Facility	Indicates that the facility transfers hazardous waste.
Offsite Receiver	Indicates that the facility, whether public or private, currently accepts hazardous waste from another site (site identified by a different EPA ID).
HSM	Indicates that the facility manages hazardous secondary material(s) (e.g. spent material, by-product or sludge) that when discarded, would be identified as hazardous waste.
Subpart K	Indicates that the facility has opted into the subpart K laboratory rule. It then specifies the type of facility (C - College or University; H - Teaching Hospital; N - Non-profit Research Institute; W - withdrawal from the rule)
Full Enforcement	Indicates that the facility is a Treatment, Storage or Disposal facility which is part of the Full Enforcement universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
CA Workload	Indicates that the facility is part of the Corrective Action Workload universe. ('Y' indicates that the facility is in this universe).
Active State Gen	Indicates that the facility is an Active State Generator. ('Y' indicates that the facility is in this universe).
Converter	Indicates that the facility is a Converter Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State TSDF	Indicates that the facility is a State Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State Unaddressed SNC	Indicates that the facility is a State Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State Addressed SNC	Indicates that the facility is a State Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State SNC w/ Compl. Sched	Indicates that the facility is a State Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).
EPA Unaddressed SNC	Indicates that the facility is an EPA Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA Addressed SNC	Indicates that the facility is an EPA Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA SNC w/ Compl. Sched	Indicates that the facility is a EPA Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).

* Note: Penalty amount may not reflect all violations cited.

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

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Description of codes used on the report:

ACCESSIBILITY - indicates the reason why the handler is not accessible for normal RCRA tracking and processing (previously called Bankrupt Indicator):	
Code	Description
B	indicates that the handler has filed for bankruptcy and bankruptcy litigation is in process.
C	indicates that all RCRA responsibilities for permitting/closure, corrective action, and compliance monitoring and enforcement at the facility have been formally transferred to the CERCLA program or state equivalent.
F	indicates that all responsible parties (owners/operators) for the handler have fled the country or are otherwise not available for prosecution.
L	indicates that the handler's case is tied up in litigation to the extent that further progress in achieving RCRA compliance through normal enforcement is not possible.

NON-NOTIFIER - indicates that the handler has been identified through a source other than Notification and is suspected of conducting RCRA-regulated activities without proper authority:	
Code	Description
E	indicates that the handler was initially a non-notifier, subsequently determined to be exempt from requirements to notify.
O	indicates that the handler is a former non-notifier.
X	indicates that the handler is a non-notifier.

Evaluation Type	Type Description
CDI	CASE DEVELOPMENT INSPECTION

* Note: Penalty amount may not reflect all violations cited.